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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/521,928	01/21/2005	Ajay S Bhatnagar	ON/4 - 32602A	6202
1095 NOVARTIS	7590 04/20/200	9	EXAMINER	
	INTELLECTUAL PRO	JAVANMARD, SAHAR		
=	ONE HEALTH PLAZA 104/3 EAST HANOVER, NJ 07936-1080		ART UNIT	PAPER NUMBER
			1617	
			MAIL DATE	DELIVERY MODE
			04/20/2009	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

	Application No.	Applicant(s)	
	10/521,928	BHATNAGAR ET AL.	
Office Action Summary	Examiner	Art Unit	
	SAHAR JAVANMARD	1617	
The MAILING DATE of this communication ap Period for Reply	pears on the cover sheet with the c	correspondence address	
A SHORTENED STATUTORY PERIOD FOR REPL WHICHEVER IS LONGER, FROM THE MAILING Description of time may be available under the provisions of 37 CFR 1. after SIX (6) MONTHS from the mailing date of this communication. If NO period for reply is specified above, the maximum statutory period Failure to reply within the set or extended period for reply will, by statut Any reply received by the Office later than three months after the mailing earned patent term adjustment. See 37 CFR 1.704(b).	DATE OF THIS COMMUNICATION 136(a). In no event, however, may a reply be tin will apply and will expire SIX (6) MONTHS from e, cause the application to become ABANDONE	N. nely filed the mailing date of this communication. D (35 U.S.C. § 133).	
Status			
Responsive to communication(s) filed on <u>05 №</u> This action is FINAL . 2b) This action is application is in condition for allowed closed in accordance with the practice under	s action is non-final. ance except for formal matters, pro		
Disposition of Claims			
4) Claim(s) 18,19,23 and 24 is/are pending in the 4a) Of the above claim(s) is/are withdra 5) Claim(s) is/are allowed. 6) Claim(s) 18, 19, and 23-24 is/are rejected. 7) Claim(s) is/are objected to. 8) Claim(s) are subject to restriction and/o	awn from consideration.		
9) The specification is objected to by the Examin 10) The drawing(s) filed on is/are: a) accomposed and applicant may not request that any objection to the Replacement drawing sheet(s) including the correct to by the E	cepted or b) objected to by the lead rawing(s) be held in abeyance. Section is required if the drawing(s) is objection	e 37 CFR 1.85(a). jected to. See 37 CFR 1.121(d).	
Priority under 35 U.S.C. § 119			
12) Acknowledgment is made of a claim for foreign a) All b) Some * c) None of: 1. Certified copies of the priority document 2. Certified copies of the priority document 3. Copies of the certified copies of the priority application from the International Bureat* See the attached detailed Office action for a list	nts have been received. Its have been received in Applicationity documents have been received au (PCT Rule 17.2(a)).	on No ed in this National Stage	
Attachment(s) 1) Notice of References Cited (PTO-892) 2) Notice of Draftsperson's Patent Drawing Review (PTO-948) 3) Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date	4) Interview Summary Paper No(s)/Mail Da 5) Notice of Informal F 6) Other:	ate	

DETAILED ACTION

Status of the Application

A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on 03/05/2009 has been entered.

Claim(s) 18, 19, and 23-24 are pending. Claim(s) 18, 19, and 24 have been amended. Claim(s) 18, 19, and 23-24 are examined herein.

Response to Arguments

Applicant's amendments, with respect to the 112 1st rejection of claims 1 and 10, as it applies to the removal of the term "prevention", have been considered and is hereby withdrawn.

Applicant's arguments with respect to claims 1, 18, 19, and 22-24 rejected under the 103(a) obviousness rejection as being unpatentable over Freyer et al. (European Journal of Internal Medicine, 2000) in view of Reid (N. Engl. J. Med., 2002) and Iqbal (Expert Opin. Pharmacother.), have been fully considered but found not persuasive.

In response to applicant's argument that there is no suggestion to combine the references, the examiner recognizes that obviousness can only be established by

amendments.

combining or modifying the teachings of the prior art to produce the claimed invention where there is some teaching, suggestion, or motivation to do so found either in the references themselves or in the knowledge generally available to one of ordinary skill in the art. See *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988)and *In re Jones*, 958 F.2d 347, 21 USPQ2d 1941 (Fed. Cir. 1992). In view of Applicant's amendments, the 103(a) obviousness rejection of the last Office Action has been maintained for reasons of record and modified below as a result of Applicant's claim

Page 3

Furthermore, Applicant is arguing specific doses of zoledronic acid and letrozole which are effective in treating bone loss. These arguments are not commensurate in scope of the invention.

Applicant's amendments with respect to claim 10 rejected under the 103(a) obviousness rejection as being unpatentable over Freyer et al. (European Journal of Internal Medicine, 2000) in view of Remington's: The Science and Practice of Pharmacy, Nineteenth Edition, Vol I, 1985, page 806), have been fully considered and the rejection is hereby withdrawn.

In view of Applicant's amendments, the 103(a) obviousness rejection of the last Office Action has been maintained for reasons of record and modified below as a result of Applicant's claim amendments.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

Claims 18, 19, and 23-24 are rejected under 35 U.S.C. 103(a) as being unpatentable over Freyer et al. in view of Reid (N. Engl. J. Med., 2002) and Iqbal (Expert Opin. Pharmacother.).

Freyer discloses a study whereby patients with bone marrow involvement (BMI), common in metastatic breast cancer, and panycytopenia are administered a combination regimen including hormone therapy (i.e., anti-estrogens, LH-RH agonists, aromatase inhibitors (anastrozole), and progestin derivatives), repeated low dose

chemotherapy, and bisphosphonates (pamidronate) (page 329-330, Introduction; page 331, see Treatment Strategy).

Freyer further teaches that among the five patients treated, three of them were post-menopausal with bone metastasis having ER+ and/or PR+ receptors (page 330, table 1).

Freyer does not teach specifically teach zoledronic acid as the bisphosphonate or letrozole as the aromatase inhibitor. Additionally, Freyer does not teach that the bisphosphonate is administered once every six months.

Reid teaches administering in zoledronic acid to postmenopausal women with low bone density (page 654, methods). Reid further teaches that zoledronic acid is the most potent bisphosphonate that has been studied in clinical trials to date. Reid further teaches that zoledronic acid is superior to pamidronate in the treatment of cancer-related hypercalcemia. Additionally, Reid teaches that because of its high potency, only small doses are required for the inhibition of bone resorption, and long dosing intervals may be used (page 654, lines 1-6), including administering zoledronic acid at base line and again at six months (page 654, see Treatment).

Iqbal teaches that aromatase inhibitors have been found effective in treating breast cancer in postmenopausal women (page 977, lines 11-13). Iqbal further teaches among other aromatase inhibitors, anastrazole and letrozole are markedly effective in inhibiting in situ aromatase activity (page 976, see 2.1.1.1 Endocrine effects; page 977 Table 1).

Art Unit: 1617

Additionally, Iqbal teaches that anastrazole and letrozole have both been approved by the FDA as first-line agents for the treatment of advanced breast cancer.

Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to have employed the administration of an aromatase inhibitor and a bisphosphonate as taught by Freyer, using specifically zoledronic acid as the bisphosphonate and letrozole as the aromatase inhibitor. The motivation to use zoledronic acid as the bisphosphonate to treat bone loss is provided by Reid. As noted above, Reid teaches zoledronic acid as one of the most potent bisphosphonates that has been studied in clinical trials to date. Further, Reid teaches that because of its high potency, only small doses are required for the inhibition of bone resorption, and long dosing intervals may be used. Thus one of ordinary skill in the art is inclined to use a bisphosphonate that exhibits the highest efficacy and least number of administrations required. The motivation to use letrozole as the aromatase inhibitor is provided by Igbal. As discussed above, Igbal teaches letrozole as one of the first-line agents for the treatment of advanced breast cancer. It is generally common practice among one of ordinary skill in the art to select the one of the most active analogs in a family of drugs to achieve the most promising results.

Conclusion

Claims 18, 19, and 23-24 are not allowed.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for

Application/Control Number: 10/521,928 Page 7

Art Unit: 1617

published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only.

For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to SAHAR JAVANMARD whose telephone number is (571) 270-3280. The examiner can normally be reached on 8 AM-5 PM MON-FRI (EST).

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Sreeni Padmanabhan can be reached on (571) 272-0629. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

/S. J./

/SREENI PADMANABHAN/

Supervisory Patent Examiner, Art Unit 1617